

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

CIGNA Corporation Political Action Committee

ADDRESS (number and street)

Two Liberty Place

1601 Chestnut St

☐Check if different
than previously
reported. (ACC)

Philadelphia

PA

19192

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00085316

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☒

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

08

01

2007

through

08

31

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mari Newman, Asst. Treasurer

Signature of Treasurer

Electronically Filed by Mari Newman, Asst. Treasurer

Date

09

20

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
CIGNA Corporation Political Action Committee

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		20629.41
(b) Cash on Hand at Beginning of Reporting Period	25951.45	
(c) Total Receipts (from Line 19)	10900.35	107490.39
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	36851.80	128119.80
7. Total Disbursements (from Line 31)	11000.00	102268.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	25851.80	25851.80
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

CIGNA Corporation Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	8	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	8	3	1	2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	3928.46	29475.93
(ii) Unitemized	6971.89	78014.46
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	10900.35	107490.39
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	10900.35	107490.39
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	10900.35	107490.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10900.35	107490.39

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		10000.00	79500.00
24. Independent Expenditure (use Schedule E)		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees		0.00	0.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs)		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		0.00	0.00
29. Other Disbursements.....		1000.00	22768.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share		0.00	0.00
(ii) "Levin" Share		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		11000.00	102268.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		11000.00	102268.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	10900.35	107490.39
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10900.35	107490.39
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 57

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)

James Austin

Mailing Address 394 W Remington Drive

City

State

Zip Code

Chandler

AZ

85248-2642

FEC ID number of contributing
federal political committee.

C

Name of Employer
CIGNA HEALTHCARE OF AZ;
INC

Occupation

GENERAL SURGEON

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

390.72

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-7604-23-3

Amount of Each Receipt this Period

23.35

B.

Full Name (Last, First, Middle Initial)

James Austin

Mailing Address 394 W Remington Drive

City

State

Zip Code

Chandler

AZ

85248-2642

FEC ID number of contributing
federal political committee.

C

Name of Employer
CIGNA HEALTHCARE OF AZ;
INC

Occupation

GENERAL SURGEON

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

390.72

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-7672-23-3

Amount of Each Receipt this Period

23.35

C.

Full Name (Last, First, Middle Initial)

Rosemary B Bartley

Mailing Address 2958 Bartelmy Lane

City

State

Zip Code

Saint Paul

MN

55109-1518

FEC ID number of contributing
federal political committee.

C

Name of Employer
CIGNA BEHAVIORAL HEALTH;
INC.

Occupation

ADMIN SVCS SR SPECIALIST

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-8333-23-3

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

61.70

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Rosemary B Bartley
Mailing Address 2958 Bartelmy Lane

City State Zip Code
Saint Paul MN 55109-1518

FEC ID number of contributing
federal political committee.

C

Name of Employer
CIGNA BEHAVIORAL HEALTH;
INC.

Occupation
ADMIN SVCS SR SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-8401-23-3

Amount of Each Receipt this Period

15.00

B. Full Name (Last, First, Middle Initial)
Michael Bell
Mailing Address 2126 Inverness Lane

City State Zip Code
Berwyn PA 19312-1992

FEC ID number of contributing
federal political committee.

C

Name of Employer
CIGNA CORPORATION

Occupation
EVP CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-6027-23-3

Amount of Each Receipt this Period

20.00

C. Full Name (Last, First, Middle Initial)
Michael Bell
Mailing Address 2126 Inverness Lane

City State Zip Code
Berwyn PA 19312-1992

FEC ID number of contributing
federal political committee.

C

Name of Employer
CIGNA CORPORATION

Occupation
EVP CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-6087-23-3

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

55.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 57

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Paul B Borgesen Mailing Address 7022 W Kimberly Way City Glendale State AZ Zip Code 85308-5758 FEC ID number of contributing federal political committee. C Name of Employer CIGNA HEALTHCARE OF AZ; INC Occupation OTOLARYNGOLOGIST Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 374.68		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20070820-8516-23-3 Amount of Each Receipt this Period <table border="1"> <tr> <td>22.04</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	3		2	0	0	7	22.04
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		2	3		2	0	0	7														
22.04																							
B. Full Name (Last, First, Middle Initial) Paul B Borgesen Mailing Address 7022 W Kimberly Way City Glendale State AZ Zip Code 85308-5758 FEC ID number of contributing federal political committee. C Name of Employer CIGNA HEALTHCARE OF AZ; INC Occupation OTOLARYNGOLOGIST Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 374.68		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20070806-8586-23-3 Amount of Each Receipt this Period <table border="1"> <tr> <td>22.04</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	9		2	0	0	7	22.04
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	9		2	0	0	7														
22.04																							
C. Full Name (Last, First, Middle Initial) Zigmund R Brzezinski Mailing Address 15 Olden Drive City Flemington State NJ Zip Code 08822-1978 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation OPERATIONS DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 228.87		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20070820-3605-23-3 Amount of Each Receipt this Period <table border="1"> <tr> <td>13.73</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	3		2	0	0	7	13.73
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		2	3		2	0	0	7														
13.73																							

SUBTOTAL of Receipts This Page (optional)

57.81

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)

Zigmund R Brzezinski

Mailing Address 15 Olden Drive

City State Zip Code
 Flemington NJ 08822-1978

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
OPERATIONS DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.87

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-3642-23-3

Amount of Each Receipt this Period

13.73

B. Full Name (Last, First, Middle Initial)

M. L Buckley

Mailing Address 3651 N Leavitt Street

City State Zip Code
 Chicago IL 60618-4821

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
ACCOUNT MANAGER-NATIONAL ACCTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.68

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-6125-23-3

Amount of Each Receipt this Period

9.62

C. Full Name (Last, First, Middle Initial)

M. L Buckley

Mailing Address 3651 N Leavitt Street

City State Zip Code
 Chicago IL 60618-4821

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
ACCOUNT MANAGER-NATIONAL ACCTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.68

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-6185-23-3

Amount of Each Receipt this Period

45.66

SUBTOTAL of Receipts This Page (optional)

69.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)

John Cannon

Mailing Address PO Box 226

City State Zip Code
 Solebury PA 18963-0226

FEC ID number of contributing
federal political committee.

C

Name of Employer
CIGNA CORPORATION

Occupation
SVP CHIEF COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1632.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-3224-23-3

Amount of Each Receipt this Period

96.00

B. Full Name (Last, First, Middle Initial)

John Cannon

Mailing Address PO Box 226

City State Zip Code
 Solebury PA 18963-0226

FEC ID number of contributing
federal political committee.

C

Name of Employer
CIGNA CORPORATION

Occupation
SVP CHIEF COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1632.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-3256-23-3

Amount of Each Receipt this Period

96.00

C. Full Name (Last, First, Middle Initial)

William C Carlson

Mailing Address 99 Westmont Street

City State Zip Code
 West Hartford CT 06117-2929

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
EQUITY SENIOR MANAGING DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-927-23-3

Amount of Each Receipt this Period

22.00

SUBTOTAL of Receipts This Page (optional)

214.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
William C Carlson
Mailing Address 99 Westmont Street

City State Zip Code
West Hartford CT 06117-2929

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
EQUITY SENIOR MANAGING DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-937-23-3

Amount of Each Receipt this Period

22.00

B. Full Name (Last, First, Middle Initial)
Christophe M Coloian
Mailing Address 36 Ruth Circle

City State Zip Code
Malvern PA 19355-3188

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
MEDICAL PROGRAM SR DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-12317-23-3

Amount of Each Receipt this Period

12.00

C. Full Name (Last, First, Middle Initial)
David M Cordani
Mailing Address 32 Lucy Way

City State Zip Code
Simsbury CT 06070-2527

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
SVP CUSTOMER SEGMENT & MKTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-617-23-3

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

69.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) David M Cordani Mailing Address 32 Lucy Way City State Zip Code Simsbury CT 06070-2527 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation SVP CUSTOMER SEGMENT & MKTG Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 595.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7 Transaction ID: 20070806-623-23-3 Amount of Each Receipt this Period 35.00
B. Full Name (Last, First, Middle Initial) Andrew D Crooks Mailing Address 323 Turtle Trail City State Zip Code Lake Mary FL 32746-3619 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation GENERAL MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 7 Transaction ID: 20070820-11899-23-3 Amount of Each Receipt this Period 25.00
C. Full Name (Last, First, Middle Initial) Andrew D Crooks Mailing Address 323 Turtle Trail City State Zip Code Lake Mary FL 32746-3619 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation GENERAL MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7 Transaction ID: 20070806-11995-23-3 Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)

85.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Johannes M De Jong

Mailing Address 6122 McCallum Street

City State Zip Code
Philadelphia PA 19144-2604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CIGNA CORPORATION

Occupation
ASSOC CHIEF COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-298-23-3

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Johannes M De Jong

Mailing Address 6122 McCallum Street

City State Zip Code
Philadelphia PA 19144-2604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CIGNA CORPORATION

Occupation
ASSOC CHIEF COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-301-23-3

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Thomas P Degemmis

Mailing Address 2276 Warner Road

City State Zip Code
Lansdale PA 19446-5853

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
VP SERVICE OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-1010-23-3

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Thomas P Degemmis
Mailing Address 2276 Warner Road

City State Zip Code
Lansdale PA 19446-5853

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
VP SERVICE OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-1021-23-3

Amount of Each Receipt this Period

50.00

B. Full Name (Last, First, Middle Initial)
Edwin J Detrick
Mailing Address 17 Swallow Road

City State Zip Code
Holland PA 18966-1951

FEC ID number of contributing
federal political committee.

C

Name of Employer
CIGNA CORPORATION

Occupation
VP INVESTOR RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-3440-23-3

Amount of Each Receipt this Period

20.00

C. Full Name (Last, First, Middle Initial)
Edwin J Detrick
Mailing Address 17 Swallow Road

City State Zip Code
Holland PA 18966-1951

FEC ID number of contributing
federal political committee.

C

Name of Employer
CIGNA CORPORATION

Occupation
VP INVESTOR RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-3477-23-3

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 57

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Keith Dixon Mailing Address 1715 Morgan Avenue S City State Zip Code Minneapolis MN 55405-2205 FEC ID number of contributing federal political committee. C Name of Employer CIGNA BEHAVIORAL HEALTH; INC. Occupation PRESIDENT BEHAVIORAL HEALTH Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 7 Transaction ID: 20070820-8220-23-3 Amount of Each Receipt this Period 25.00
B. Full Name (Last, First, Middle Initial) Keith Dixon Mailing Address 1715 Morgan Avenue S City State Zip Code Minneapolis MN 55405-2205 FEC ID number of contributing federal political committee. C Name of Employer CIGNA BEHAVIORAL HEALTH; INC. Occupation PRESIDENT BEHAVIORAL HEALTH Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7 Transaction ID: 20070806-8288-23-3 Amount of Each Receipt this Period 25.00
C. Full Name (Last, First, Middle Initial) Jeannine Doherty Mailing Address 15038 N 43rd Street City State Zip Code Phoenix AZ 85032-8107 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation SENIOR ACCOUNT MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 443.86		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 7 Transaction ID: 20070820-42-23-3 Amount of Each Receipt this Period 6.13

SUBTOTAL of Receipts This Page (optional)

56.13

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jeannine Doherty

Mailing Address 15038 N 43rd Street

City State Zip Code
 Phoenix AZ 85032-8107

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
COOccupation
SENIOR ACCOUNT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

443.86

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-42-23-3

Amount of Each Receipt this Period

6.78

Full Name (Last, First, Middle Initial)

B. Lisa A Douglas

Mailing Address 773 Palisado Avenue

City State Zip Code
 Windsor CT 06095-2029

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
COOccupation
MARKETING PRODUCT DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.41

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-418-23-3

Amount of Each Receipt this Period

14.78

Full Name (Last, First, Middle Initial)

C. Lisa A Douglas

Mailing Address 773 Palisado Avenue

City State Zip Code
 Windsor CT 06095-2029

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
COOccupation
MARKETING PRODUCT DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.41

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-421-23-3

Amount of Each Receipt this Period

14.78

SUBTOTAL of Receipts This Page (optional)

36.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Daryl W Edmonds
Mailing Address 9211 Sand Hill Street

City State Zip Code
Highlands Ranch CO 80126-5219

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
GENERAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-8590-23-3

Amount of Each Receipt this Period

25.00

B. Full Name (Last, First, Middle Initial)
Daryl W Edmonds
Mailing Address 9211 Sand Hill Street

City State Zip Code
Highlands Ranch CO 80126-5219

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
GENERAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-8661-23-3

Amount of Each Receipt this Period

25.00

C. Full Name (Last, First, Middle Initial)
Beverly J Everett
Mailing Address 3826 Casey Leigh Lane

City State Zip Code
Raleigh NC 27612-4258

FEC ID number of contributing federal political committee.

C

Name of Employer
INT'L REHAB. ASSOCIATES;
INC.

Occupation
MEDICAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-135-23-3

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional) ▶

65.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Beverly J Everett Mailing Address 3826 Casey Leigh Lane City State Zip Code Raleigh NC 27612-4258 FEC ID number of contributing federal political committee. C Name of Employer INT'L REHAB. ASSOCIATES; INC. Occupation MEDICAL DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 255.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7 Transaction ID: 20070806-137-23-3 Amount of Each Receipt this Period 15.00
B. Full Name (Last, First, Middle Initial) Robert Fair Mailing Address 1758 Boulevard City State Zip Code West Hartford CT 06107-2818 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation INVESTMENT MANAGING DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 7 Transaction ID: 20070820-295-23-3 Amount of Each Receipt this Period 20.00
C. Full Name (Last, First, Middle Initial) Robert Fair Mailing Address 1758 Boulevard City State Zip Code West Hartford CT 06107-2818 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation INVESTMENT MANAGING DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7 Transaction ID: 20070806-298-23-3 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)

55.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) David Ferriss		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 7
Mailing Address 6325 Wescates Court		Transaction ID: 20070820-11066-23-3
City Brentwood	State TN	Zip Code 37027-5648
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MEDICAL SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

B. Full Name (Last, First, Middle Initial) David Ferriss		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7
Mailing Address 6325 Wescates Court		Transaction ID: 20070806-11154-23-3
City Brentwood	State TN	Zip Code 37027-5648
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation MEDICAL SENIOR DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

C. Full Name (Last, First, Middle Initial) Robert S Fry		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 7
Mailing Address 1004 Beech Bay Road		Transaction ID: 20070820-3859-23-3
City Poplar Grove	State IL	Zip Code 61065-8242
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer CT GENERAL LIFE INSURANCE CO	Occupation GENERAL MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

SUBTOTAL of Receipts This Page (optional)

70.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)

Robert S Fry

Mailing Address 1004 Beech Bay Road

City State Zip Code
 Poplar Grove IL 61065-8242

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
GENERAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-3899-23-3

Amount of Each Receipt this Period

20.00

B. Full Name (Last, First, Middle Initial)

David J Giannoni

Mailing Address 2030 James Farm Road

City State Zip Code
 Stratford CT 06614-1071

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
SENIOR ACCOUNT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

518.05

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-5498-23-3

Amount of Each Receipt this Period

6.73

C. Full Name (Last, First, Middle Initial)

David J Giannoni

Mailing Address 2030 James Farm Road

City State Zip Code
 Stratford CT 06614-1071

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
SENIOR ACCOUNT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

518.05

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-5553-23-3

Amount of Each Receipt this Period

6.73

SUBTOTAL of Receipts This Page (optional)

33.46

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 57

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Paul J Gontarek Mailing Address 7442 Devon Street City Philadelphia State PA Zip Code 19119-1018 FEC ID number of contributing federal political committee. C Name of Employer CIGNA CORPORATION Occupation ASSOC CHIEF COUNSEL Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 7 Transaction ID: 20070820-4011-23-3 Amount of Each Receipt this Period 25.00
B. Full Name (Last, First, Middle Initial) Paul J Gontarek Mailing Address 7442 Devon Street City Philadelphia State PA Zip Code 19119-1018 FEC ID number of contributing federal political committee. C Name of Employer CIGNA CORPORATION Occupation ASSOC CHIEF COUNSEL Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7 Transaction ID: 20070806-4053-23-3 Amount of Each Receipt this Period 25.00
C. Full Name (Last, First, Middle Initial) Douglas R Hadley Mailing Address 301 Glen Echo Lane Apt. B City Cary State NC Zip Code 27511-9680 FEC ID number of contributing federal political committee. C Name of Employer INT'L REHAB. ASSOCIATES; INC. Occupation NATIONAL MEDICAL SR DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 7 Transaction ID: 20070820-8989-23-3 Amount of Each Receipt this Period 20.00
SUBTOTAL of Receipts This Page (optional) ▶		70.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)

Douglas R Hadley

Mailing Address 301 Glen Echo Lane Apt. B

City State Zip Code
 Cary NC 27511-9680

FEC ID number of contributing federal political committee.

C

Name of Employer
INT'L REHAB. ASSOCIATES;
INC.Occupation
NATIONAL MEDICAL SR DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-9063-23-3

Amount of Each Receipt this Period

20.00

B. Full Name (Last, First, Middle Initial)

Clay R Hedlund

Mailing Address 2504 Briarcrest Drive

City State Zip Code
 Irving TX 75063-3175

FEC ID number of contributing federal political committee.

C

Name of Employer
CIGNA DENTAL HEALTH; INC.Occupation
DENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.53

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-8966-23-3

Amount of Each Receipt this Period

12.34

C. Full Name (Last, First, Middle Initial)

Robert P Hockmuth

Mailing Address 135 Brackett Road

City State Zip Code
 Rye NH 03870-2044

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
COOccupation
MEDICAL SENIOR DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.08

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-1002-23-3

Amount of Each Receipt this Period

19.24

SUBTOTAL of Receipts This Page (optional) ▶

51.58

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Robert P Hockmuth Mailing Address 135 Brackett Road City State Zip Code Rye NH 03870-2044 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation MEDICAL SENIOR DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 327.08		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7 Transaction ID: 20070806-1013-23-3 Amount of Each Receipt this Period 19.24
B. Full Name (Last, First, Middle Initial) Jerilyn Jacobs Mailing Address 136 Avondale Avenue City State Zip Code Haddonfield NJ 08033-2636 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation OPERATIONS DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 497.43		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 7 Transaction ID: 20070820-2803-23-3 Amount of Each Receipt this Period 14.48
C. Full Name (Last, First, Middle Initial) Jerilyn Jacobs Mailing Address 136 Avondale Avenue City State Zip Code Haddonfield NJ 08033-2636 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation OPERATIONS DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 497.43		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7 Transaction ID: 20070806-2832-23-3 Amount of Each Receipt this Period 65.34

SUBTOTAL of Receipts This Page (optional)

99.06

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
William S Jameson
Mailing Address 690 Bradford Street

City State Zip Code
Pasadena CA 91105-2411

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
ASSOC CHIEF COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-9219-23-3

Amount of Each Receipt this Period

25.00

B. Full Name (Last, First, Middle Initial)
William S Jameson
Mailing Address 690 Bradford Street

City State Zip Code
Pasadena CA 91105-2411

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
ASSOC CHIEF COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-9293-23-3

Amount of Each Receipt this Period

25.00

C. Full Name (Last, First, Middle Initial)
Frank E Jones
Mailing Address 2622 Cedarvue Drive

City State Zip Code
Pittsburgh PA 15241-2912

FEC ID number of contributing
federal political committee.

C

Name of Employer
INT'L REHAB. ASSOCIATES;
INC.

Occupation
MEDICAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.55

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-4174-23-3

Amount of Each Receipt this Period

16.28

SUBTOTAL of Receipts This Page (optional)

66.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Frank E Jones Mailing Address 2622 Cedarvue Drive City State Zip Code Pittsburgh PA 15241-2912 FEC ID number of contributing federal political committee. C Name of Employer INT'L REHAB. ASSOCIATES; INC. Occupation MEDICAL DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 274.55		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7 Transaction ID: 20070806-4218-23-3 Amount of Each Receipt this Period 16.28
B. Full Name (Last, First, Middle Initial) Scott Josephs Mailing Address 403 Tramore Drive City State Zip Code Chapel Hill NC 27516-4642 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation MEDICAL SENIOR DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 255.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 7 Transaction ID: 20070820-10002-23-3 Amount of Each Receipt this Period 15.00
C. Full Name (Last, First, Middle Initial) Scott Josephs Mailing Address 403 Tramore Drive City State Zip Code Chapel Hill NC 27516-4642 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation MEDICAL SENIOR DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 255.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7 Transaction ID: 20070806-10081-23-3 Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional)

46.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Kristin P Julason Mailing Address 2939 Van Ness Street Northwest Apt City Washington State DC Zip Code 20008-4629 FEC ID number of contributing federal political committee. C Name of Employer CIGNA CORPORATION Occupation GOVERNMENT AFFAIRS DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 255.00		Date of Receipt MM / DD / YYYY 08 / 23 / 2007 Transaction ID: 20070820-3318-23-3 Amount of Each Receipt this Period 15.00
B. Full Name (Last, First, Middle Initial) Kristin P Julason Mailing Address 2939 Van Ness Street Northwest Apt City Washington State DC Zip Code 20008-4629 FEC ID number of contributing federal political committee. C Name of Employer CIGNA CORPORATION Occupation GOVERNMENT AFFAIRS DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 255.00		Date of Receipt MM / DD / YYYY 08 / 09 / 2007 Transaction ID: 20070806-3352-23-3 Amount of Each Receipt this Period 15.00
C. Full Name (Last, First, Middle Initial) Kenneth P Langevin Mailing Address 32 Castlewood Road City West Hartford State CT Zip Code 06107-2903 FEC ID number of contributing federal political committee. C Name of Employer CIGNA CORPORATION Occupation SENIOR COUNSEL Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 255.00		Date of Receipt MM / DD / YYYY 08 / 23 / 2007 Transaction ID: 20070820-1732-23-3 Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional)

45.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Kenneth P Langevin		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7 Transaction ID: 20070806-1756-23-3
Mailing Address 32 Castlewood Road		
City	State	Zip Code
West Hartford	CT	06107-2903
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 15.00
Name of Employer CIGNA CORPORATION		
Occupation SENIOR COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 255.00		

B. Full Name (Last, First, Middle Initial) William P Lawless		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 7 Transaction ID: 20070820-2504-23-3
Mailing Address 509 S Bay Shore Boulevard		
City	State	Zip Code
Gilbert	AZ	85233-6624
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 20.00
Name of Employer CIGNA HEALTHCARE OF AZ; INC		
Occupation ADULT MEDICINE PRACTITIONER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 340.00		

C. Full Name (Last, First, Middle Initial) William P Lawless		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7 Transaction ID: 20070806-2531-23-3
Mailing Address 509 S Bay Shore Boulevard		
City	State	Zip Code
Gilbert	AZ	85233-6624
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 20.00
Name of Employer CIGNA HEALTHCARE OF AZ; INC		
Occupation ADULT MEDICINE PRACTITIONER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 340.00		

SUBTOTAL of Receipts This Page (optional)

55.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Lisa F Lawrence Mailing Address 15602 Eastbourn Drive City State Zip Code Odessa FL 33556-2850 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation OPERATIONS MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 215.84		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 7 Transaction ID: 20070820-4501-23-3 Amount of Each Receipt this Period 12.95
B. Full Name (Last, First, Middle Initial) Lisa F Lawrence Mailing Address 15602 Eastbourn Drive City State Zip Code Odessa FL 33556-2850 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation OPERATIONS MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 215.84		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7 Transaction ID: 20070806-4546-23-3 Amount of Each Receipt this Period 12.95
C. Full Name (Last, First, Middle Initial) Christophe R Loomis Mailing Address 909 Overton Avenue City State Zip Code Yardley PA 19067-1025 FEC ID number of contributing federal political committee. C Name of Employer CIGNA CORPORATION Occupation ASSOC CHIEF COUNSEL Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 7 Transaction ID: 20070820-6271-23-3 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)

45.90

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Christophe R Loomis

Mailing Address 909 Overton Avenue

City State Zip Code
Yardley PA 19067-1025

FEC ID number of contributing
federal political committee.

C

Name of Employer
CIGNA CORPORATION

Occupation
ASSOC CHIEF COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-6331-23-3

Amount of Each Receipt this Period

20.00

B. Full Name (Last, First, Middle Initial)

Jon E Maesner

Mailing Address 22 Crosswood Road

City State Zip Code
Farmington CT 06032-1043

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
OPERATIONS SENIOR DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-8998-23-3

Amount of Each Receipt this Period

15.00

C. Full Name (Last, First, Middle Initial)

Jon E Maesner

Mailing Address 22 Crosswood Road

City State Zip Code
Farmington CT 06032-1043

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
OPERATIONS SENIOR DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-9072-23-3

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)

Carla C Mangiafico

Mailing Address 47 Kelsey Lane

City State Zip Code
 Glastonbury CT 06033-5040

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
ACCOUNTING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-342-23-3

Amount of Each Receipt this Period

15.00

B. Full Name (Last, First, Middle Initial)

Carla C Mangiafico

Mailing Address 47 Kelsey Lane

City State Zip Code
 Glastonbury CT 06033-5040

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
ACCOUNTING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-345-23-3

Amount of Each Receipt this Period

15.00

C. Full Name (Last, First, Middle Initial)

David Mannis

Mailing Address 5 Meade Lane

City State Zip Code
 Chappaqua NY 10514-1208

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
GOVERNMENT AFFAIRS DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-2308-23-3

Amount of Each Receipt this Period

12.00

SUBTOTAL of Receipts This Page (optional)

42.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. John W Matheny

Mailing Address 43 S Taylor Point Drive

City

the Woodlands

State

TX

Zip Code

77382-1243

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation

PROVIDER CONTRACTING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.11

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-5803-23-3

Amount of Each Receipt this Period

16.78

Full Name (Last, First, Middle Initial)

B. John W Matheny

Mailing Address 43 S Taylor Point Drive

City

the Woodlands

State

TX

Zip Code

77382-1243

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation

PROVIDER CONTRACTING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.11

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-5861-23-3

Amount of Each Receipt this Period

16.78

Full Name (Last, First, Middle Initial)

C. William McGean

Mailing Address 10 Grosvenor Road

City

Waltham

State

MA

Zip Code

02453-6821

FEC ID number of contributing
federal political committee.

C

Name of Employer
LIFE INS. CO. OF NORTH AM-
ERICA

Occupation

CORPORATE REAL ESTATE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-11691-23-3

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

48.56

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) William McGean Mailing Address 10 Grosvenor Road City State Zip Code Waltham MA 02453-6821 FEC ID number of contributing federal political committee. C Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation CORPORATE REAL ESTATE MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 255.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7 Transaction ID: 20070806-11787-23-3 Amount of Each Receipt this Period 15.00
B. Full Name (Last, First, Middle Initial) Steven G Mellas Mailing Address 20 Lexington Manor City State Zip Code Glenmoore PA 19343-1900 FEC ID number of contributing federal political committee. C Name of Employer CIGNA CORPORATION Occupation COMPLIANCE DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 204.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 7 Transaction ID: 20070820-2294-23-3 Amount of Each Receipt this Period 12.00
C. Full Name (Last, First, Middle Initial) Morris D Mirabella Mailing Address 5820 Aventura Court City State Zip Code Tampa FL 33625-4111 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation SALES MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 255.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 7 Transaction ID: 20070820-9673-23-3 Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional)

42.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)

Morris D Mirabella

Mailing Address 5820 Aventura Court

City State Zip Code
 Tampa FL 33625-4111

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
COOccupation
SALES MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-9750-23-3

Amount of Each Receipt this Period

15.00

B. Full Name (Last, First, Middle Initial)

Kymberly P Miranda

Mailing Address 5633 Northwest 88th Terrace

City State Zip Code
 Coral Springs FL 33067-2862

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
COOccupation
ACCOUNT MANAGER-NATIONAL ACCTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-6324-23-3

Amount of Each Receipt this Period

20.00

C. Full Name (Last, First, Middle Initial)

Kymberly P Miranda

Mailing Address 5633 Northwest 88th Terrace

City State Zip Code
 Coral Springs FL 33067-2862

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
COOccupation
ACCOUNT MANAGER-NATIONAL ACCTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-6384-23-3

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

55.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 57

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) John M Murabito Mailing Address 105 Mill View Lane City State Zip Code Newtown Square PA 19073-1428 FEC ID number of contributing federal political committee. C Name of Employer CIGNA CORPORATION Occupation EVP HUMAN RESOURCES & SERVICES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1700.00			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td>/</td><td>2</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20070820-15183-23-3 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	2	3	/	2	0	0	7	100.00
M	M	/	D	D	/	Y	Y	Y	Y															
0	8	/	2	3	/	2	0	0	7															
100.00																								
B. Full Name (Last, First, Middle Initial) John M Murabito Mailing Address 105 Mill View Lane City State Zip Code Newtown Square PA 19073-1428 FEC ID number of contributing federal political committee. C Name of Employer CIGNA CORPORATION Occupation EVP HUMAN RESOURCES & SERVICES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1700.00			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20070806-15313-23-3 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	9	/	2	0	0	7	100.00
M	M	/	D	D	/	Y	Y	Y	Y															
0	8	/	0	9	/	2	0	0	7															
100.00																								
C. Full Name (Last, First, Middle Initial) Daniel Nicoll Mailing Address 4 Bayview Drive City State Zip Code Plainview NY 11803-1534 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation MEDICAL SENIOR DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 437.55			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td>/</td><td>2</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20070820-2654-23-3 Amount of Each Receipt this Period <table border="1"> <tr> <td>25.93</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	2	3	/	2	0	0	7	25.93
M	M	/	D	D	/	Y	Y	Y	Y															
0	8	/	2	3	/	2	0	0	7															
25.93																								

SUBTOTAL of Receipts This Page (optional)

225.93

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 57

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Daniel Nicoll Mailing Address 4 Bayview Drive City Plainview State NY Zip Code 11803-1534 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation MEDICAL SENIOR DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 437.55		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20070806-2682-23-3 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">25.93</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	9		2	0	0	7	25.93									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	8		0	9		2	0	0	7																							
25.93																																
B. Full Name (Last, First, Middle Initial) Jeffery L Novak Mailing Address 34 Sherman Drive City Malvern State PA Zip Code 19355-3185 FEC ID number of contributing federal political committee. C Name of Employer CIGNA CORPORATION Occupation VP CORPORATE SERVICES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1445.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20070820-11926-23-3 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">85.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	3		2	0	0	7	85.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	8		2	3		2	0	0	7																							
85.00																																
C. Full Name (Last, First, Middle Initial) Jeffery L Novak Mailing Address 34 Sherman Drive City Malvern State PA Zip Code 19355-3185 FEC ID number of contributing federal political committee. C Name of Employer CIGNA CORPORATION Occupation VP CORPORATE SERVICES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1445.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20070806-12022-23-3 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">85.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	9		2	0	0	7	85.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	8		0	9		2	0	0	7																							
85.00																																
SUBTOTAL of Receipts This Page (optional) ▶		<table border="1"> <tr> <td colspan="10">195.93</td> </tr> </table>	195.93																													
195.93																																
TOTAL This Period (last page this line number only) ▶		<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																														

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Eliana Nunez			Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 7	
Mailing Address 120 Ridge Crest Circle			Transaction ID: 20070820-1539-23-3	
City State Zip Code Wethersfield CT 06109-4618			Amount of Each Receipt this Period 14.63	
FEC ID number of contributing federal political committee. C				
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation PROJECT MANAGEMENT DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 245.83		
B. Full Name (Last, First, Middle Initial) Eliana Nunez			Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7	
Mailing Address 120 Ridge Crest Circle			Transaction ID: 20070806-1559-23-3	
City State Zip Code Wethersfield CT 06109-4618			Amount of Each Receipt this Period 14.63	
FEC ID number of contributing federal political committee. C				
Name of Employer CT GENERAL LIFE INSURANCE CO		Occupation PROJECT MANAGEMENT DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 245.83		
C. Full Name (Last, First, Middle Initial) Charlene Parsons			Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 7	
Mailing Address 1179 Colts Lane			Transaction ID: 20070820-15817-23-3	
City State Zip Code Yardley PA 19067-3964			Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C				
Name of Employer CIGNA CORPORATION		Occupation VP TOTAL REWARDS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1445.00		

SUBTOTAL of Receipts This Page (optional)

114.26

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Charlene Parsons
Mailing Address 1179 Colts Lane

City State Zip Code
Yardley PA 19067-3964

FEC ID number of contributing federal political committee.

C

Name of Employer
CIGNA CORPORATIONOccupation
VP TOTAL REWARDS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1445.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-15958-23-3

Amount of Each Receipt this Period

85.00

B. Full Name (Last, First, Middle Initial)
Mark A Parsons
Mailing Address 15 Rexinger Lane

City State Zip Code
Avon CT 06001-2340

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE COOccupation
SVP REINSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-603-23-3

Amount of Each Receipt this Period

20.00

C. Full Name (Last, First, Middle Initial)
Mark A Parsons
Mailing Address 15 Rexinger Lane

City State Zip Code
Avon CT 06001-2340

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE COOccupation
SVP REINSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-608-23-3

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 57

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)

John R Perlstein

Mailing Address 19 Clover Lane

City	State	Zip Code
Manchester	CT	06040-6771

FEC ID number of contributing
federal political committee.

C

Name of Employer
CIGNA CORPORATIONOccupation
VP CHIEF COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1445.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	0	7

Transaction ID: 20070820-2184-23-3

Amount of Each Receipt this Period

85.00

B. Full Name (Last, First, Middle Initial)

John R Perlstein

Mailing Address 19 Clover Lane

City	State	Zip Code
Manchester	CT	06040-6771

FEC ID number of contributing
federal political committee.

C

Name of Employer
CIGNA CORPORATIONOccupation
VP CHIEF COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1445.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	0	7

Transaction ID: 20070806-2210-23-3

Amount of Each Receipt this Period

85.00

C. Full Name (Last, First, Middle Initial)

Glenn D Pomerantz

Mailing Address 140 Hyde Road

City	State	Zip Code
West Hartford	CT	06117-1620

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
COOccupation
MEDICAL SENIOR DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	0	7

Transaction ID: 20070820-12014-23-3

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

190.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)

Glenn D Pomerantz

Mailing Address 140 Hyde Road

City State Zip Code
 West Hartford CT 06117-1620

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
MEDICAL SENIOR DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-12111-23-3

Amount of Each Receipt this Period

20.00

B. Full Name (Last, First, Middle Initial)

John C Rademacher

Mailing Address 746 Calabria Lane

City State Zip Code
 Ambler PA 19002-1539

FEC ID number of contributing
federal political committee.

C

Name of Employer
INT'L REHAB. ASSOCIATES;
INC.

Occupation
OPERATIONS SENIOR DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-13222-23-3

Amount of Each Receipt this Period

25.00

C. Full Name (Last, First, Middle Initial)

John C Rademacher

Mailing Address 746 Calabria Lane

City State Zip Code
 Ambler PA 19002-1539

FEC ID number of contributing
federal political committee.

C

Name of Employer
INT'L REHAB. ASSOCIATES;
INC.

Occupation
OPERATIONS SENIOR DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-13333-23-3

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

70.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. William J Reedy

Mailing Address 1539 E Hackamore Street

City State Zip Code
Mesa AZ 85203-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer
CIGNA HEALTHCARE OF AZ;
INC

Occupation
URGENT CARE PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-8269-23-3

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. William J Reedy

Mailing Address 1539 E Hackamore Street

City State Zip Code
Mesa AZ 85203-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer
CIGNA HEALTHCARE OF AZ;
INC

Occupation
URGENT CARE PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-8337-23-3

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Jane L Renninger

Mailing Address 73 Tyler Court

City State Zip Code
Avon CT 06001-3165

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
COMPLIANCE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.50

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-3356-23-3

Amount of Each Receipt this Period

13.27

SUBTOTAL of Receipts This Page (optional)

53.27

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jane L Renninger

Mailing Address 73 Tyler Court

City State Zip Code
 Avon CT 06001-3165

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
COMPLIANCE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.50

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-3391-23-3

Amount of Each Receipt this Period

13.27

Full Name (Last, First, Middle Initial)

B. Thomas B Richards

Mailing Address 3 Scarborough Road

City State Zip Code
 Simsbury CT 06070-1257

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
VP PRODUCT LEADER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-844-23-3

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Thomas B Richards

Mailing Address 3 Scarborough Road

City State Zip Code
 Simsbury CT 06070-1257

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
VP PRODUCT LEADER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-853-23-3

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

63.27

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
Michael G Rogers
Mailing Address 37 W Goshen Avenue

City State Zip Code
Clovis CA 93611-7196

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
OPERATIONS DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.35

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-9145-23-3

Amount of Each Receipt this Period

14.67

B. Full Name (Last, First, Middle Initial)
Michael G Rogers
Mailing Address 37 W Goshen Avenue

City State Zip Code
Clovis CA 93611-7196

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
OPERATIONS DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.35

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-9218-23-3

Amount of Each Receipt this Period

14.67

C. Full Name (Last, First, Middle Initial)
Karen S Rohan
Mailing Address 13 Fisherick Road

City State Zip Code
Ware MA 01082-9775

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
PRESIDENT HEALTHCARE SUBSID

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-188-23-3

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

79.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Karen S Rohan		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7
Mailing Address 13 Fisherdict Road		
City	State	Zip Code
Ware	MA	01082-9775
FEC ID number of contributing federal political committee.		Transaction ID: 20070806-191-23-3
Name of Employer CT GENERAL LIFE INSURANCE CO		Amount of Each Receipt this Period 50.00
Occupation PRESIDENT HEALTHCARE SUBSID		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 850.00

B. Full Name (Last, First, Middle Initial) Michael J Ross		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 7
Mailing Address 147 Old Gulph Road		
City	State	Zip Code
Wynnewood	PA	19096-1016
FEC ID number of contributing federal political committee.		Transaction ID: 20070820-13706-23-3
Name of Employer LIFE INS. CO. OF NORTH AMERICA		Amount of Each Receipt this Period 85.00
Occupation VP MARKETING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1445.00

C. Full Name (Last, First, Middle Initial) Michael J Ross		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7
Mailing Address 147 Old Gulph Road		
City	State	Zip Code
Wynnewood	PA	19096-1016
FEC ID number of contributing federal political committee.		Transaction ID: 20070806-13822-23-3
Name of Employer LIFE INS. CO. OF NORTH AMERICA		Amount of Each Receipt this Period 85.00
Occupation VP MARKETING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1445.00

SUBTOTAL of Receipts This Page (optional)

220.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)

Richard B Salmon

Mailing Address 5 Hawks Ridge

City State Zip Code
 Avon CT 06001-4417

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
COOccupation
NATIONAL MEDICAL SR DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-2521-23-3

Amount of Each Receipt this Period

30.00

B. Full Name (Last, First, Middle Initial)

Richard B Salmon

Mailing Address 5 Hawks Ridge

City State Zip Code
 Avon CT 06001-4417

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
COOccupation
NATIONAL MEDICAL SR DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-2548-23-3

Amount of Each Receipt this Period

30.00

C. Full Name (Last, First, Middle Initial)

David N Sasportas

Mailing Address 125 Wadhams Road

City State Zip Code
 Bloomfield CT 06002-1250

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
COOccupation
APP DEVELOPMENT DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-529-23-3

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 57

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) David N Sasportas Mailing Address 125 Wadhams Road City Bloomfield State CT Zip Code 06002-1250 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation APP DEVELOPMENT DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7 Transaction ID: 20070806-533-23-3 Amount of Each Receipt this Period 20.00
B. Full Name (Last, First, Middle Initial) David S Scheibe Mailing Address 257 Linden Street City Moorestown State NJ Zip Code 08057-3622 FEC ID number of contributing federal political committee. C Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation TREASURY SENIOR DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 7 Transaction ID: 20070820-1764-23-3 Amount of Each Receipt this Period 20.00
C. Full Name (Last, First, Middle Initial) David S Scheibe Mailing Address 257 Linden Street City Moorestown State NJ Zip Code 08057-3622 FEC ID number of contributing federal political committee. C Name of Employer LIFE INS. CO. OF NORTH AMERICA Occupation TREASURY SENIOR DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7 Transaction ID: 20070806-1789-23-3 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Stephen J Sherry

Mailing Address 597 Cheese Spring Road

City State Zip Code
 New Canaan CT 06840-2917

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
SALES MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

568.25

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-2276-23-3

Amount of Each Receipt this Period

13.62

Full Name (Last, First, Middle Initial)

B. Stephen J Sherry

Mailing Address 597 Cheese Spring Road

City State Zip Code
 New Canaan CT 06840-2917

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
SALES MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

568.25

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-2302-23-3

Amount of Each Receipt this Period

13.18

Full Name (Last, First, Middle Initial)

C. Donald R Spelhaug

Mailing Address 5710 W Arrowhead Lakes Drive

City State Zip Code
 Glendale AZ 85308-6217

FEC ID number of contributing
federal political committee.

C

Name of Employer
CIGNA HEALTHCARE OF AZ;
INC

Occupation
ADULT MEDICINE PRACTITIONER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-8338-23-3

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

46.80

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)

Donald R Spelhaug

Mailing Address 5710 W Arrowhead Lakes Drive

City State Zip Code
 Glendale AZ 85308-6217

FEC ID number of contributing
federal political committee.

C

Name of Employer
CIGNA HEALTHCARE OF AZ;
INC

Occupation
ADULT MEDICINE PRACTITIONER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-8407-23-3

Amount of Each Receipt this Period

20.00

B. Full Name (Last, First, Middle Initial)

Otha T Spriggs

Mailing Address 66 Cedar Hill Lane

City State Zip Code
 Media PA 19063-6311

FEC ID number of contributing
federal political committee.

C

Name of Employer
LIFE INS. CO. OF NORTH AM-
ERICA

Occupation
VP HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1445.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-12194-23-3

Amount of Each Receipt this Period

85.00

C. Full Name (Last, First, Middle Initial)

Otha T Spriggs

Mailing Address 66 Cedar Hill Lane

City State Zip Code
 Media PA 19063-6311

FEC ID number of contributing
federal political committee.

C

Name of Employer
LIFE INS. CO. OF NORTH AM-
ERICA

Occupation
VP HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1445.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-12292-23-3

Amount of Each Receipt this Period

85.00

SUBTOTAL of Receipts This Page (optional)

190.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jennifer Stepp

Mailing Address 5833 Carrollton Avenue

City State Zip Code
 Indianapolis IN 46220-2617

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
COOccupation
SENIOR ACCOUNT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.90

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-5597-23-3

Amount of Each Receipt this Period

27.12

Full Name (Last, First, Middle Initial)

B. Jennifer Stepp

Mailing Address 5833 Carrollton Avenue

City State Zip Code
 Indianapolis IN 46220-2617

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
COOccupation
SENIOR ACCOUNT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.90

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-5653-23-3

Amount of Each Receipt this Period

26.03

Full Name (Last, First, Middle Initial)

C. Cathrin Stickney

Mailing Address 69 W 9th Street
Apt. 5G

City State Zip Code
 New York NY 10011-8977

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
COOccupation
SEGMENT MARKETING SR DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-10516-23-3

Amount of Each Receipt this Period

18.00

SUBTOTAL of Receipts This Page (optional)

71.15

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Cathrin Stickney Mailing Address 69 W 9th Street Apt. 5G City New York State NY Zip Code 10011-8977 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation SEGMENT MARKETING SR DIR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 306.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7 Transaction ID: 20070806-10601-23-3 Amount of Each Receipt this Period 18.00
B. Full Name (Last, First, Middle Initial) Daniel M Sullivan Mailing Address 108 Governors Way City Brentwood State TN Zip Code 37027-8932 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation OPERATIONS SENIOR DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 255.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 7 Transaction ID: 20070820-2041-23-3 Amount of Each Receipt this Period 15.00
C. Full Name (Last, First, Middle Initial) Daniel M Sullivan Mailing Address 108 Governors Way City Brentwood State TN Zip Code 37027-8932 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation OPERATIONS SENIOR DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 255.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7 Transaction ID: 20070806-2067-23-3 Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional)

48.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)

Shelly Swinford

Mailing Address 5 Pinnacle Mountain Road

City State Zip Code
 Simsbury CT 06070-1808

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
BUSINESS PROJECT DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.67

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-5568-23-3

Amount of Each Receipt this Period

15.75

B. Full Name (Last, First, Middle Initial)

Shelly Swinford

Mailing Address 5 Pinnacle Mountain Road

City State Zip Code
 Simsbury CT 06070-1808

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
BUSINESS PROJECT DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.67

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-5624-23-3

Amount of Each Receipt this Period

15.75

C. Full Name (Last, First, Middle Initial)

Jeff S Terrill

Mailing Address 9556 E Cortez Street

City State Zip Code
 Scottsdale AZ 85260-5866

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE
CO

Occupation
GENERAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-11259-23-3

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

51.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Jeff S Terrill Mailing Address 9556 E Cortez Street City State Zip Code Scottsdale AZ 85260-5866 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation GENERAL MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7 Transaction ID: 20070806-11348-23-3 Amount of Each Receipt this Period 20.00
B. Full Name (Last, First, Middle Initial) Nancy E Tucker Mailing Address 522 E Commerce Street City State Zip Code Milford MI 48381-1720 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation SENIOR ACCOUNT MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 437.70		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 7 Transaction ID: 20070820-6303-23-3 Amount of Each Receipt this Period 5.77
C. Full Name (Last, First, Middle Initial) Nancy E Tucker Mailing Address 522 E Commerce Street City State Zip Code Milford MI 48381-1720 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation SENIOR ACCOUNT MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 437.70		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7 Transaction ID: 20070806-6363-23-3 Amount of Each Receipt this Period 5.77

SUBTOTAL of Receipts This Page (optional)

31.54

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)

Katharine L Wade

Mailing Address PO Box 241

City State Zip Code
 Simsbury CT 06070-0241

FEC ID number of contributing
federal political committee.

C

Name of Employer
CIGNA CORPORATION

Occupation
GOVERNMENT AFFAIRS DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-915-23-3

Amount of Each Receipt this Period

15.00

B. Full Name (Last, First, Middle Initial)

Katharine L Wade

Mailing Address PO Box 241

City State Zip Code
 Simsbury CT 06070-0241

FEC ID number of contributing
federal political committee.

C

Name of Employer
CIGNA CORPORATION

Occupation
GOVERNMENT AFFAIRS DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-925-23-3

Amount of Each Receipt this Period

15.00

C. Full Name (Last, First, Middle Initial)

Scott D Watson

Mailing Address 1813 Shadywood Court

City State Zip Code
 Chesterfield MO 63017-5440

FEC ID number of contributing
federal political committee.

C

Name of Employer
LIFE INS. CO. OF NORTH AM-
ERICA

Occupation
ACCOUNT MANAGER-NATIONAL ACCTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.06

Date of Receipt

M M / D D / Y Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-6078-23-3

Amount of Each Receipt this Period

15.38

SUBTOTAL of Receipts This Page (optional)

45.38

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial)
 Scott D Watson
 Mailing Address 1813 Shadywood Court

City State Zip Code
 Chesterfield MO 63017-5440

FEC ID number of contributing
federal political committee.

C

Name of Employer
 LIFE INS. CO. OF NORTH AM-
 ERICA

Occupation
 ACCOUNT MANAGER-NATIONAL ACCTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.06

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-6138-23-3

Amount of Each Receipt this Period

22.98

B. Full Name (Last, First, Middle Initial)
 Richard M White
 Mailing Address 68 Longwood Drive

City State Zip Code
 Portland ME 04102-1524

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE
 CO

Occupation
 PROVIDER CONTRACTING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 3 / 2 0 0 7

Transaction ID: 20070820-2488-23-3

Amount of Each Receipt this Period

20.00

C. Full Name (Last, First, Middle Initial)
 Richard M White
 Mailing Address 68 Longwood Drive

City State Zip Code
 Portland ME 04102-1524

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE
 CO

Occupation
 PROVIDER CONTRACTING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-2515-23-3

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

62.98

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A. Full Name (Last, First, Middle Initial) Rebekah C Whitehouse Mailing Address 2640 W Tulsa Street City Chandler State AZ Zip Code 85224-4174 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation MARKETING COMM SENIOR DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 7 Transaction ID: 20070820-12114-23-3 Amount of Each Receipt this Period 20.00
B. Full Name (Last, First, Middle Initial) Rebekah C Whitehouse Mailing Address 2640 W Tulsa Street City Chandler State AZ Zip Code 85224-4174 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation MARKETING COMM SENIOR DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 7 Transaction ID: 20070806-12212-23-3 Amount of Each Receipt this Period 20.00
C. Full Name (Last, First, Middle Initial) Bu Yang Mailing Address 121 High Wood Drive City South Glastonbury State CT Zip Code 06073-2908 FEC ID number of contributing federal political committee. C Name of Employer CT GENERAL LIFE INSURANCE CO Occupation ARCHITECTURE DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 255.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 7 Transaction ID: 20070820-11216-23-3 Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional)

55.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 57

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Bu Yang

Mailing Address 121 High Wood Drive

City

South Glastonbury

State

CT

Zip Code

06073-2908

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE
CO

Occupation

ARCHITECTURE DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 0 7

Transaction ID: 20070806-11305-23-3

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

15.00

TOTAL This Period (last page this line number only)

3928.46

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 56 / 57

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Democratic Executive Committee of Florida

Mailing Address 214 South Bronough Street

City State Zip Code
Tallahassee FL 32302

Purpose of Disbursement
2007 Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2007
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

2007 Contribution

Transaction ID: 4159290708085407632

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Republican Party of Florida

Mailing Address 420 East Jefferson Street
PO Box 311

City State Zip Code
Tallahassee FL 32301

Purpose of Disbursement
2007 Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2007
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

2007 Contribution

Transaction ID: 1153980708085393449

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

10000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 57 / 57

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CIGNA Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Nutter for Mayor

Mailing Address PO Box 58550

City
Philadelphia

State
PA

Zip Code
19102

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: EDQ7GQ5C7XGWD2

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

1000.00